



3629

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Serial No.: 09/550,963

CERTIFICATE OF MAILING PURSUANT TO 37 C.F.R. §1.8

I hereby certify that the attached Response and Amendment, pursuant to 37 C.F.R. § 1.8, are being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on:

Date: April 16, 2004

By: Deane G. Mascari
Signature of Person Depositing First Class Mail

**IN THE UNITED STATES PATENT AND
TRADEMARK OFFICE**

PATENT

Applicant:	Mark McCulloch	Docket No.:	50655.2200
Serial No.:	09/550,963	Group Art Unit:	3629
Filed:	April 17, 2000	Examiner:	Thomas A. Dixon
Title:	METHODS AND APPARATUS FOR TRANSPORTATION PLANNING AND LOGISTICAL MANAGEMENT	Confirmation No.:	1825

RESPONSE AND AMENDMENT

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

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GROUP 3600

Dear Assistant Commissioner:

In response to the Office Action mailed January 8, 2004, please amend the above-identified application as follows and consider the Amendments and Remarks beginning on the following page.

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AMENDMENT TRANSMITTAL LETTER (Large Entity)

Applicant(s): Mark McCulloch

Docket No.

50655.2200

Serial No.

09/550,963

Filing Date

April 17, 2000

Examiner

Thomas A. Dixon

Group Art Unit

3629

Invention: TRAVEL INFORMATION COLLECTION

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GROUP 3600TO THE COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	34 -	37 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	4 -	5 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- ☐ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-2814
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☒ Any patent application processing fees under 37 CFR 1.17.

Signature

Dated: April 6, 2004

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CC:

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on April 6, 2004 with the U.S. Postal Service as
first class mail under 37 C.F.R. 1.8 and is addressed to the
Commissioner for Patents, P.O. Box 1450, Alexandria, VA
22313-1450.

Signature of Person Mailing Correspondence

Suzie G. Mascari

Typed or Printed Name of Person Mailing Correspondence